

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	9/29/00
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>[Signature]</i>	10/2/00
FORMALITY REVIEW	<i>[Signature]</i>	545	11-2-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

**BEST AVAILABLE COPY**

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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